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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application Of: Shaver, et al.

Group No.: To Be Assigned

Serial No.: 10/829,057

Docket No. 200314194-1

Filed: 4/21/04

For: Systems and Methods for Providing Internal Universal Serial Bus Ports

**SUBMISSION OF SUPPLEMENTAL DECLARATION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

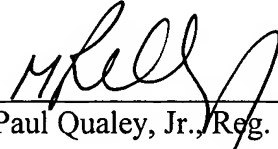
Sir:

Applicants submit herewith a Supplemental Declaration regarding the above-identified patent application. The Supplemental Declaration is being submitted to correct the country of citizenship of the inventor, Ricardo Marquez. A corrected Filing Receipt is requested in this regard.

Respectfully Submitted,

**THOMAS, KAYDEN, HORSTEMEYER  
& RISLEY, L.L.P.**

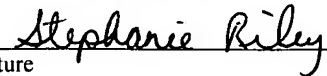
By:

  
M. Paul Qualey, Jr., Reg. No. 43,024

100 Galleria Parkway, Suite 1750  
Atlanta, Georgia 30339  
770-933-9500

**CERTIFIED MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service **First Class Mail,** in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 5/18/04

  
Signature

DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATIONATTORNEY DOCKET NO. 200314194-1

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name:

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Systems and Methods for Providing Internal Universal Serial Bus Ports

the specification of which is attached hereto unless the following box is checked:

(X) was filed on 4/21/04 as US Application No. or PCT International Application  
Number 10/829,057 and was amended on \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understood the contents of the above identified specification, including the claims, as amended by any amendment(s) referred to above. I acknowledge the duty to disclose all information which is material to patentability as defined in 37 CFR 1.56.

## Foreign Application(s) and/or Claim of Foreign Priority

I hereby claim foreign priority benefits under Title 35, United States Code Section 119 of any foreign application(s) for patent or inventor(s) certificate listed below and have also identified below any foreign application for patent or inventor(s) certificate having a filing date before that of the application on which priority is claimed:

COUNTRY	APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
			YES: _____ NO: _____
			YES: _____ NO: _____

## Provisional Application

I hereby claim the benefit under Title 35, United States Code Section 119(e) of any United States provisional application(s) listed below:

APPLICATION NUMBER	FILING DATE

## U. S. Priority Claim

I hereby claim the benefit under Title 35, United States Code, Section 120 of any United States application(s) listed below and insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code Section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

APPLICATION NUMBER	FILING DATE	STATUS (patented/pending/abandoned)

## POWER OF ATTORNEY:

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Send Correspondence to:

Customer Number 022879HEWLETT-PACKARD COMPANY  
Intellectual Property Administration  
P.O. Box 272400  
Fort Collins, Colorado 80527-2400

Direct Telephone Calls to:

William P. O'Meara  
(970) 898-7917

Even though the attorney is listed, please associate HP's Customer Number 022879 with this case.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of Inventor: Charles Norman ShaverCitizenship: U.S.Residence: 13630 Merilee Court, Cypress, Texas 77429

Post Office Address: \*

Inventor's Signature

Date

**DECLARATION AND POWER OF ATTORNEY  
FOR PATENT APPLICATION (continued)**

ATTORNEY DOCKET NO. 200314194-1

Full Name of # 2 joint inventor: Ricardo Marquez

Citizenship: Mexico

Residence: 3102 Rimrock Drive, Missouri City, Texas 77459

Post Office Address: \_\_\_\_\_

Inventor's Signature: [Signature]

Date: 5/17/04

Full Name of # 3 joint inventor: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name of # 4 joint inventor: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name of # 5 joint inventor: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name of # 6 joint inventor: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name of # 7 joint inventor: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full Name of # 8 joint inventor: \_\_\_\_\_

Citizenship: \_\_\_\_\_

Residence: \_\_\_\_\_

Post Office Address: \_\_\_\_\_

Inventor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_